PTO/SB/01 (6-95) Approved for use through: 10/31/98 OMB 0651-0032

Type a plus sign (+) inside this	box +	Patent and Trademark	k Office; U.S. DEPARTMENT OF COMMERCE							
0010/PTO Rev. 6/95	U.S. Department of Commerce Patent and Trademark Office	Attorney Docket Number	H 5316 US							
DECLARA	TION FOR	First Named Inventor	Quellhorst et al.							
UTILITY O	R DESIGN	COMPLETE IF KNOWN								
PATENT AP	PLICATION	Application Number								
		Filing Date								
Declaration C	R Declaration Submitted after	Group Art Unit								
with Initial Filing	Initial Filing	Examiner Name								
My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: ANTICORROSIVE AGENT AND CORROSION PROTECTION PROCESS FOR METAL (Title of the Invention) the specification of which X is attached hereto OR										
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Certified Copy Attached? Not Claimed YES NO							
101 31 723.9	DE	06/30/2001	X							
Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:										
I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.										
Application Number(s)	Filing Date (MM/DD/YYYY)	ap ar su sh	dditional provisional opplication numbers e listed on a applemental priority neet attached hereto.							

amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

Type a	nlus	sian	(+)	inside	this	hox	

DECLARATION

Page	2
------	---

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filling date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number PCT Parent Number (MM/DD/YYYY) (if application to the policy of the												
PCT/EP02/06888 06/21/2002 Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.												
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in t												
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:												
Firm Name Customer or label Number												
OR X List Attorney(s) and/or agent(s) name and registration number below:												
Name Registration Name Number	Registration Number											
Stephen D. Harper 33,243 Glenn E. J. Murphy 33,539	•											
Steven C. Bauman 33,832												
Gregory M. Hill 31,369												
Mary K. Cameron 34,789												
Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.												
Please direct all correspondence to: OR Fill in correspondence address below												
Name Stephen D. Harper												
Address Henkel Corporation												
Address The Triad, Suite 200, 2200 Renaissance Blvd												
City Gulph Mills State PA Zip '	19406											
Country USA Telephone 610-278-4927 Fax 610-278-654	610-278-6548											
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.												
Name of Sole or First Inventor: A petition has been filed for this unsigned.	ned inventor											
Given Name Heike Middle Initial Family Name Quellhorst Suffice.g.												
Inventor's Signature Date												
Residence: City Duesseldorf State Country Germany Citizenship	Germany											
Post Office Address Hermann-Harry-Schmitz-Str. 75												
Post Office Address												
Post Office Address City 40227 Duesseldorf State Zip Country Germany Applicant Authority												

Type a plus sign (+) inside this box .

											ADDITIONAL INVENTOR(S) Supplemental Sh et							
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor																		
Given Name					Middle Initial	dle al		M. Fai		nily me	Ko	Koch			Suffix e.g. Jr			
Inventor's Signature														Date				
Resid	ence: (City	Due	esseldorf		State				C	ountry Germany Citizenship C					Germ	any	
Post Office Address Himmelgeister Str. 83															***************************************			
Post Office Address																		
City	4022	5 Due	sse	ldorf	State	Zip					Cour	untry Germany		у	Applicant Authority			
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor											-							
Given Name		Pat	rick	(Middle Initial			Fam		Droniou				Suffix e.g. Jr.			
Invent Signa					•				•					Date				<u> </u>
Resid	ence: (City	Col	ombes		State	State			Country		F	rance		Citizenship		France	
Post (Office A	Addres	S	5ter rue Tilly	,	•		-										
Post 0	Office A	Addres	ss															
City 92700 Colombes State					Z	ip		Co		ntry	ntry France		Applicant Authority					
Nam	Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor																	
Given Name		Ma	rian			Middle Initial		Famil Name			nily me	Pa	Pawlik Suffix e.g. Jr.					
Invent Signa														Date	Date			
Residence: City Oberhausen					State	ate (C	Country Germany			Citizens		nip	Germ	any	
Post Office Address Hegerfeldstrasse 10																		
Post (Office A	Addres	ss															
City 46149 Oberhausen State			State	Zip		p			Count		ntry Germany		Applicant Authority					
Nam	Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor																	
Given Name				Middle Initial				Far Na	nily me			Su e.g		ffix . Jr.				
Inventor's Signature													Date					
Residence: City St						State		С			ountry				Citizenship			
Post (Office A	Addres	s		······································								**				-	
Post (Office A	\ddres	ss						_									
City				State		z	ip			Cour	ntry			Applica Authori	nt ty			
$\vdash \vdash$	Addi	tional	inver	ntors are being	named	on supple	eme	ental	sheet	t(s) a	attache	d he	reto	-				